

State of South Dakota



Candidate's or Committee's Report of Receipts and Expenditures

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S.D. SEC. OF STATE
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Candidates and candidate committees: File in the office where you filed your nominating petition.

PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office,
500 E Capitol Ave., Pierre, SD 57501-5070

See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.

Name of Candidate or Committee Democracy in ActionComplete Mailing Address 705 W. Blvd., Rapid City, SD 57701Name of Person Making Report KAREN POTHARDT Daytime Phone Number 605-209-0959

If you are a candidate, what office are you seeking? _____

If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.

Type of Report (See pages 4 & 5 of Guideline Book) PACFor Reporting Period Ending (See pages 4 & 5 of Guideline Book) 12/31/2004*The following verification must be completed before submitting report.*

VERIFICATION OF PERSON MAKING REPORT

I KAREN POTHARDT (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.Date: 1/31/05

Candidate Signature or
Signature of Committee Treasurer or Chairperson

Revised July 2001

Filed this 2nd day of
February, 2005
 Chi. Nelson
 SECRETARY OF STATE

Name of Candidate or Committee

For the reporting period ending _____

Schedule A – Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

Unitemized Contributions from Individuals:

*\$

Itemized Contributions from Individuals

Total of Itemized Contributions from Individuals:

*\$